PROCEDURE

Subject: Incident Reporting  
Responsible Program or Office: DDS Quality Management Division

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1. PURPOSE

The purpose of this procedure is to delineate Department on Disability Services ("DDS") and provider responsibilities and establish a standardized process for incident reporting. Incident reporting is an essential part of an incident management system, necessary to protect health and safety, mitigate risk of reoccurrence, and to improve overall the quality of services and supports through incident report investigation, and data tracking, trending and analysis.

2. APPLICABILITY

This procedure applies to all DDS employees, subcontractors, providers/vendors, consultants, volunteers, and governmental agencies that provide services and supports to people with disabilities through the Developmental Disabilities Administration ("DDA") service delivery system, funded by DDA and/ or the Department of Health Care Finance ("DHCF").
3. PROCEDURES

A. Types of Incidents

There are two types of incidents, Serious Reportable Incidents (“SRIs”) and Reportable Incidents (“RIs”), which have different requirements for reporting. See “Reportable Incidents Definitions,” attached.

1. Reportable Incidents (RI): An RI is an event or situation involving a risk, threat or actual event that impacts a person’s health or safety that includes, but is not limited to:
   a. Emergency relocation
   b. Emergency room or urgent care visit
   c. Emergency unauthorized use of restrictive controls (that are in a category typically approved by DDS, but that have not been approved for use with this person)
   d. Fire
   e. Inappropriate use of approved restraints (no injury)
   f. Incidents involving the police
   g. Medication error
   h. Physical injury
   i. Property destruction
   j. Suicide threat
   k. Vehicle accident
   l. Other

2. Serious Reportable Incidents (SRI): An SRI is an RI that due to its significance, severity, or repeated instance within a period of time, requires immediate response and notification to DDS/DDA. SRIs include, but are not limited to:
   a. Abuse
   b. Death
   c. Exploitation
   d. Inappropriate use of approved restraints that results in injury
   e. Missing person
   f. Neglect
   g. Repeated emergency use of restrictive controls
   h. Serious medication error
   i. Serious physical injury
   j. Suicide attempt
   k. Use of unapproved restraints
   l. Unplanned or emergency inpatient hospitalization
   m. Other
B. Incident Reporting

1. The first priority for DDS and the provider is to ensure the health, safety and well-being of the person, and/or other people served in the same location or by the same staff.

2. Provider and DDS employees, contractors, consultants, volunteers, or interns who observe, discover or are informed of any incident shall report that incident to his or her immediate supervisor (or designee) as soon as possible, but no later than the end of his or her scheduled work period.

3. All incidents observed, reported or discovered shall be entered into the DDA’s Information System, MCIS Investigation and Reporting system no later than 5 p.m on the following business day.
   a. A provider employee who learns of an incident is required to enter the incident or ensure that it is entered into the MCIS.
   b. A DDS employee who learns of an incident is required to enter the incident, unless he or she does not have access to the MCIS Investigation and Reporting system. If the employee does not have access, he or she must notify the IMEU Supervisory Investigator, who will be responsible for entering the incident, or ensuring that it is entered into MCIS.
   c. People who live with their families or independently may report incidents to their DDA Service Coordinator or to a staff member of a provider agency. It is the responsibility of the person who is informed to enter the incident into MCIS.
   d. When incidents occur on a DHCF contracted transportation provider’s vehicle, the residential services provider is responsible for reporting the incident into MCIS. If the person does not receive residential services (Residential Habilitation, Supported Living, Periodic Supported Living or Host Home), the DDA Transportation Liaison is required to enter the incident into MCIS.

4. All providers must report all incidents to the proper authorities, as appropriate, including but not limited to:
   a. Emergency personnel, as needed, via 911.
   b. The person’s parent or guardian, unless otherwise documented as contraindicated.
   c. The person’s DDA service coordinator or DDA Duty Officer.
      i. For SRIs that occur during the business day, the provider either must speak with the person’s service coordinator or enter the incident into MCIS by 5 p.m. that day. Entering the incident into MCIS will generate an automatic
alert for the service coordinator. (If the provider chooses to call the person’s Service Coordinator rather than enter the incident into MCIS immediately, the provider must still enter the incident into the MCIS Investigation and Reporting system by 5 p.m. the following business day).

ii. When there is an SRI that occurs during non-business hours, the provider must either immediately enter the incident into the MCIS Investigation and Reporting system, generating an automated alert for the Duty Officer; or must call the DDA Duty Officer at 202-498-9077 and speak directly with the Duty Officer. If the phone goes to the recorded message, the provider may leave a message but if the call is not returned within 30 minutes the provider must escalate the reporting to the Mayors Call Center. In the event that the Duty Officer is not reachable within 30 minutes, the provider must call 311 for the Mayor’s Call Center who will take the initial report and contact the DDA Duty Officer. (If the provider chooses to call the Duty Officer rather than enter the incident into MCIS immediately, the provider must still enter the incident into the MCIS Investigation and Reporting system by 5 p.m. the following business day).

iii. The DDA Duty Officer who receives the notification is responsible, if the severity of the situation warrants, for contacting the agency leadership (DDS Deputy Director for DDA or the DDS Director) by phone. It is not acceptable to leave a message; the Duty Officer must speak with the Deputy or the Director.

d. Additionally, non–residential service providers must report incidents to the person’s residential provider, if they have one.


f. The Metropolitan Police Department, if the incident involved criminal misconduct, a missing person, or a death, at 202-727-9099.

g. Adult Protective Services for alleged abuse, neglect or exploitation of adults occurring in a natural home, at (202) 541-3950.

h. The District’s Child and Family Services Agency for alleged abuse, neglect or exploitation of children under 21 years old living in a natural home, at (202) 671-SAFE [(202) 671-7233].

5. The DDS Incident Management Enforcement Unit (“IMEU”) Supervisory Investigator shall report all SRIs to the Office of the Inspector General (“OIG”) by 5 p.m. the next business day following receipt of the SRI by the Immediate
Response Committee.

C. Sanctions

DDS may impose sanctions on providers who do not comply with the IMEU policy or procedures, or who have deficient performances in incident reporting in accordance with DDS’s Sanctions Policy and related procedures.

Attachments:

1) Reportable Incident Definitions
2) IMEU Policy
3) Abuse and Neglect Fact Sheet
4) DDS/DDA Investigation Quality Review Rating Scale
5) Time Frames for IMEU Recommendations